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RUEHRC/DEPT OF AGRICULTURE WASHINGTON DC
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UNCLAS SECTION 01 OF 02 HANOI 000116

SENSITIVE
SIPDIS

STATE FOR EAP/MLS, EAP/EP, INR, OES/STC, OES/IHA, MED
STATE PASS TO USAID FOR ANE AND GH
HHS/OSSI/DSI PASS TO OGHA (CDC/COGH FOR
SBLOUT/KMCCALL/RARTHUR/RCHITALE), PASS TO NCZVED/DFBMD/EDEB
(RTAUXE/EMINTZ) AND GDD, IEIP, DEOC
USDA PASS TO APHIS, FAS (OSTA AND OCRA), FSIS
BANGKOK FOR RMO, CDC (MMALISON/SMALONEY/AHENDERSON), USAID/RDM/A
(CBOWES/JMACARTHUR), APHIS (NCARDENAS), REO (HHOWARD)
BEIJING FOR HHS HEALTH ATTACHE (BROSS)

E.O. 12958: N/A
TAGS: [TBIO](#) [AMED](#) [AMGT](#) [CASC](#) [EAGR](#) [PINR](#) [VM](#)
SUBJECT: HANOI MEASLES OUTBREAK

REF: A. 08 HANOI 588 B. 08 HANOI 381

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¶1. (U) Summary: Despite a comprehensive national vaccination program since the early 1990s, Hanoi is suffering from a measles (German measles, Rubella virus infection) outbreak in which unusual numbers of patients are exhibiting severe symptoms. The Government of Vietnam (GVN) is considering responses and has consulted with international health officials. The Embassy is finalizing internal guidance and a warden message stating that Americans who do not meet criteria for protection obtain vaccinations as recommended pursuant to Centers for Disease Control and Prevention (CDC) guidance. CDC has also offered technical assistance to the World Health Organization (WHO) and GVN health officials. End Summary.

Measles Outbreak

¶2. (SBU) The National Institute of Hygiene and Epidemiology (NIHE) reported over 320 cases of measles in Hanoi and neighboring northern provinces over the past several weeks. Though Vietnam periodically reports measles infections, national immunization programs have been comprehensive and outbreaks of this size in Hanoi are large compared with the previous several years. Although some cases have been children with typical rash illness, a strikingly unusual feature of this outbreak is that most reported cases are in young adults, many with severe disease requiring hospitalization, including encephalitis, an inflammation affecting the brain, and pneumonia. One Hanoi referral hospital recently reported seeing 6 or 7 adult patients a day with complications of measles virus infection. Hospital infection control measures are not strictly adhered to and at least one health care worker has been infected. The Ministry of Health reported last week that over 150 adult patients had been admitted to hospitals in Hanoi and neighboring provinces with serious neurological and respiratory complications. Although measles has not been reported by press or GVN authorities in Ho Chi Minh City or other large urban areas in Vietnam, an international medical newswire noted measles cases occurring elsewhere the region with some possibly traced back to Hanoi.

Severe Cases

¶3. (SBU) In early February, CDC epidemiologists saw a number of cases of measles encephalitis receiving treatment at the National Institute of Infectious and Tropical Diseases (NIITD). The director of NIITD, Professor Nguyen Van Kinh, stated that most measles cases occurred in young adults who have moved from remote areas to Hanoi where they have been newly exposed to the measles strain circulating in children. He speculated that these young adults had escaped natural infection and had been inadequately vaccinated. Pneumonia is a not uncommon complication of German measles in children, especially malnourished children, and can be fatal. Although encephalitis rarely complicates measles in otherwise healthy children (about one in a thousand cases), it is recognized as a more commonly occurring complication of infection in adults.

GVN Vaccination Campaign

¶4. Beginning in the early 1990s, Vietnam launched an aggressive campaign to eliminate measles that included a comprehensive vaccination program. However, despite a measles immunization coverage rate that has surpassed 93% since 1993 with a one-dose schedule, measles outbreaks have occurred every 7-8 years. In 2002 and 2003, the GVN conducted a nationwide mass measles immunization campaign with reported coverage of over 99 percent mainly to provide a second dose of vaccine to children aged 9 months to 9 years.

While GVN Public Statements Mixed . . .

¶5. (U) NIHE officials confirmed the seriousness of the outbreak to various CDC health professionals. Officials at the National Expanded Program for Immunizations (EPI) and at NIHE provided public warnings about the seriousness of the outbreak and described

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preventive measures for at risk populations. However, at the same time, the Director of the Vietnam Administration of Preventive Medicine (VAPM), Dr. Nguyen Huy Nga, told the media that the ongoing outbreak was not abnormal and did not involve children, and was, instead, limited to a small cohort of young adults who were not vaccinated. Vietnamese officials have not recommended new vaccinations as the reported cases remain somewhat scattered and not contained in a specific geographical area in which targeted vaccinations would be most effective.

. . . GVN Has Initiated Response

¶6. (SBU) NIHE has initiated an investigation of the outbreak and has recommended vaccinations for high risk groups, particularly health care workers. The Government of Vietnam (GVN) has pushed NIHE to craft a vaccination response, first focusing on health care workers. We have not heard credible details about a wider vaccination program. Although the GVN does not have adequate supplies for an immediate large-scale response, they are able to produce sufficient vaccine for a more measured response. NIHE briefed the World Health Organization (WHO) last week and has asked for assistance obtaining vaccines, though WHO still would like more information before determining how it might assist.

USG Response

¶7. (SBU) Due to the potential severity of the outbreak, the Embassy has crafted a warden message for the American community in Vietnam recommending all review their immunization status. Those who do not meet the protected criteria, based on prior measles illness or a history of receiving at least 2 doses of vaccine at appropriate intervals, or are unsure of their status are recommended to seek advice on vaccination from a health care provider. We will provide similar advice to Embassy personnel via Management Notice. Embassy-based CDC experts have consulted with their counterparts in Bangkok and Atlanta. CDC's Global Immunization Division has offered technical assistance to investigate the outbreak, to include sending

a team from the United States, if needed.

Comment

18. (SBU) The surprisingly high number of serious cases and infected persons in a country with immunization rates of 99 percent potentially raises questions about the success of Vietnam's earlier measles vaccination program. As GVN officials noted, many of the infected patients have come from remote rural areas, possibly indicating that coverage was not as high as thought or that the vaccine protection may have been reduced by improper vaccination (e.g., inadequate number of doses or improper timing of vaccination), or problems with vaccine efficacy from such causes as inadequate cold chain. At the same time, GVN health officials understand the severity of the outbreaks and are working to control the situation. We hope that, as with recent cholera outbreaks (refs A and B), this situation provides an opportunity to further GVN cooperation with the international community on public health issues.

MICHALAK